

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728681

FILED  
Feb 23, 2011  
Secretary of State

**Entity Name:** SAGA BAY PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

15600 SW 288 STREET  
SUITE 406  
HOMESTEAD, FL 33033 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 924176  
HOMESTEAD, FL 33092 US

**New Mailing Address:**

**FEI Number:** 59-2102284

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LUDOVICI, SUSAN M PA  
17415 SOUTH DIXIE HIGHWAY  
PALMETTO BAY, FL 33157 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: VPD  
Name: ROSA, ROBERT  
Address: 15600 SW 288 STREET, #406  
City-St-Zip: HOMESTEAD, FL 33033

Title: SD  
Name: DECARDENAS, RAUL  
Address: 15600 SW 288 STREET #406  
City-St-Zip: HOMESTEAD, FL 33033

Title: PD  
Name: MACDOUGALL, ROBERT  
Address: 15600 SW 288 STREET, #406  
City-St-Zip: HOMESTEAD, FL 33033

Title: TD  
Name: FULLANA, MARCOS  
Address: 15600 SW 288 STREET #406  
City-St-Zip: HOMESTEAD, FL 33033

Title: D  
Name: VILLAR, ARNOLD  
Address: 15600 SW 288 STREET #406  
City-St-Zip: HOMESTEAD, FL 33033

Title: D  
Name: SOTHAM, JOHN  
Address: 15600 SW 288 STREET, #406  
City-St-Zip: HOMESTEAD, FL 33033

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ROBERT MACDOUGALL

PD

02/23/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date